

Town of Whitestown Department of Building and Planning 6210 Veterans Dr Whitestown, Indiana 46075

Lauren Bailey Whitestown Town Planner 317.732.4535 Ibailey@whitestown.in.gov

COMMERCIAL/INDUSTRIAL BUILDING: ELECTRICAL ONLY PERMIT APPLICATION PACKET

This packet includes details for the documents needed to complete the application process for electrical only to a commercial or industrial building.

- Submit application and materials either by
 - E-mail: Ibailey@whitestown.in.gov ----Please merge all documents and materials into one single PDF attachment in the order of the submittal checklist (Page 2).
 - In person: See Lauren Bailey in the Building and Planning Department at 6210 Veterans Dr. Whitestown, IN
 - Mail: Send application and materials to the Building and Planning Department at 6210 Veterans Dr. Whitestown, IN
- Applications whose plans are larger than 11"x17" must be submitted entirely in electronic format (email, CD, or jump drive).

A complete application includes:

Application

SUBMITTAL CHECKLIST

 Application: Fill out all applicable fields completely.
Parcel Number: Visit the Boone County GIS website
www.boonecounty.in.gov for this 10-digit ID number. Click
"GIS">"AGREE">Search by address or zoom in on the parcel to obtain the
detailed information

PERMIT FEES AND OTHER FEES

Fees are not paid until the permit has been issued and is ready for pick up.

ELECTRICAL ONLY

\$100 base fee + \$65 for each electrical inspection.

<u>Failed inspections</u> will be assessed a respective re-inspection fee and must be paid prior to the final inspection or issuance of the Certificate of Occupancy.

Beginning work without securing permits will be assessed a fine of **twice** the calculated permit fee. Fine must be paid before a permit will be issued.

 Questions about inspections or code requirements can be directed to the Whitestown Building Inspector at 317.769.0000

ERMIT APPLICATION			Permit Number:		
his application is being submitte		Permit Fee: EDC Fee: Park Impact			
Commercial/Industrial					
Commercialy madstrian	Licetifical Offing		FeeExpires:		
Date Application is Submitted:	Driveway Permit:	Draina	ge Permit #:	Sewer/Water Permit #:	
Applicant and Contact Info	rmation				
Name of applicant:					
Address of applicant (street, city, state, z	ip):				
Contact person for the permit:					
Contact phone:	Contact email:	<u> </u>			
Contractor and Contact Inf	ormation			_	
Name of contractor:					
Address of contractor (street, city, state,	zip):				
Contact person:		Contact phone	: :		
				_	
Location Information Address of location to be improved (stree	et. city. state. zip):				
(-1.5.					
Subdivision:	Sec	ction #:		Lot #:	
Parcel number:	·			<u> </u>	
TOTAL sharehouse ones are seen after 17	£41.				
TOTAL structure area or area of work (sq	π):				
Living area:	Garage area:		Other:		
Approximate total construction cost:					
The undersigned represents that such work sha n a good workmanlike manner. Should said wo and of no force or effect whatever. The above in	rk not start in good faith	within 90 days, t	he undersigned un	derstand this application will be	
Signature of Applicant:	, ,	<u> </u>			
Priores of Applicants					